

FORM 1983

ORIGINAL
 FORM TO USED BY PRISONERS IN FILING A
 COMPLAINT UNDER THE CIVIL RIGHTS ACT, 42 U.S.C. 1983

①
6/29

IN THE UNITED STATES DISTRICT COURT
 FOR THE
 MIDDLE DISTRICT OF PENNSYLVANIA

MARK J DeRosa

(ENTER ABOVE THE FULL NAME OF THE
 PLAINTIFF OR PLAINTIFF IN THIS ACTION)

1181
1 : CV - 01 - 1198

VS.

① Sharon Amico - H.M.DPT. R/N.
 ② Kevin Warman - R/N.

FILED
HARRISBURG

JUN 28 2001

MARY E. DIANDREA, CLERK
 Per.
 DEPUTY CLERK

(ENTER ABOVE THE FULL NAME OF THE
 DEFENDANT OR DEFENDENTS IN THIS ACTION)

I. PREVIOUS LAWSUITS

A. HAVE YOU BEGUN OTHER LAWSUITS IN STATE OR FEDERAL COURT
 DEALING WITH THE SAME FACTS INVOLVED IN THIS ACTION OR
 OTHERWISE RELATING TO YOUR IMPRISONMENT

YES _____ NO X

B. IF YOUR ANSWER IS YES, DESCRIBE EACH LAWSUIT IN
 THE SPACE BELOW (IF THERE IS MORE THAN ONE LAWSUIT, DESCRIBE THE ADDITIONAL
 ON ANOTHER PIECE OF PAPER, USING THE ABOVE OUTLINE)

X

(2)

1. PARTIES TO THIS PREVIOUS LAWSUIT
PLAINTIFF _____

DEFENDANT _____

2. COURT (IF FEDERAL COURT NAME THE DISTRICT, IF STATE COURT, NAME THE COUNTY) _____

3. DOCKET NO. NUMBER _____

4. NAME OF JUDGE TO WHOM CASE WAS ASSIGNED _____

5. DISPOSITION (FOR EXAMPLE WAS THE CASE DISMISSED? WAS IT APPEALED?
IS IT PENDING) _____

6. APPROXIMATE DATE OF FILING LAWSUIT _____

7. APPROXIMATE DATE OF DISPOSITION _____

8. PLACE OF PRESENT CONFINEMENT _____

A. IS THERE A PRISONER GRIEVANCE PROCEDURE IN THIS
INSTITUTION YES ☒ NO ☐

B. DID YOU PRESENT THE FACTS RELATING TO YOUR COMPLAINT IN THE STATE
GRIEVANCE PROCEDURE? YES ☒ OR NO ☐

C. IF YOUR ANSWER IS YES

1. WHAT STEPS DID YOU TAKE _____

CRIMINAL COMPLAINT
FORMS FILED

2. WHAT WAS THE RESULTS? 11

NONE

(3)

D. IF YOUR ANSWER IS NO, EXPLAIN WHY NOT _____

III. PARTIES. (IN ITEMS A. BELOW, PLACE YOUR NAME IN THE FIRST BLANK & PLACE YOUR PRESENT ADDRESS IN THE SECOND BLANK DO THE SAME FOR ADDITIONAL PLAINTIFFS IF ANY)

a. NAME OF PLAINTIFF MARK J DeRosa

ADDRESS 99 WATER ST W-D PA 18702

(IN ITEM B BELOW, PLACE THE FULL NAME OF THE DEFENDANT IN THE FIRST BLANK HIS OFFICIAL POSITION IN THE SECOND BLANK HIS PLACE OF EMPLOYMENT IN THE THIRD BLANK USED ITEM C FOR THE NAMES OF ADDITIONAL DEFENDANTS)

b. DEFENDANT Sharron AMICO H.M. DPT. R/N IS
EMPLOYED AS R/N Head Nurse AT

c. ADDITIONAL DEFENDANTS

Kevin Warmen - R/N

IV STATEMENT OF CLAIM

STATE HERE AS BRIEFLY AS POSSIBLE THE FACTS OF YOUR CASE DESCRIBE HOW EACH DEFENDANT IS INVOLVED.

INCLUDE ALSO THE NAMES OF OTHER PERSONS INVOLVED DATES PLACES DO NOT GIVE ANY INTENT TO ALLEGE A NUMBER OF RELATED CLAIMS, NUMBER SET FORTH EACH CLAIM IN A SEPARATE PARAGRAPH USE AS MUCH SPACE AS YOU NEED ATTACH EXTRA SHEET IF NECESSARY

ON Monday - MAY-8th 5:00 PM While in 4 Post
down on 2-B mental Block.

Sharron AMICO H.M. DPT. R/N gave the order
for Kevin Warmen - R/N the ok to stick me
in my arm with some kind of drug. they both refused
to tell me what it was it was burning real
bad going in my arm. 2 seconds after they left I
was having a allergic reaction to the drug my throat
was closing and my eyes were swelling. They refused
to take action about this they thought it was a
joke I could of died.

(4)

they never ask if I was allergic to
what ever drug it was. they refused to tell
me what the drug was before they struck me
with it.

V. RELIEF

STATE BRIEFLY EXACTLY WHAT YOU WANT THE COURT TO DO FOR YOU

Requesting OFFICIAL Repremand And PUNITIVE Dammegees

MAKE NO LEGAL ARGUMENTS CITE NO CASES OR STATES

X